## **CERTIFICATE OF AUTHORITY**

(Required in all Commercial Claim and Consumer Transactions Cases)

l,	, am an
(Your Name)	, am an (officer, director, employee)
of	
(Name of corporation, partnership or associati	ion)
and have been authorized to represent the aforest	said corporation, partnership or association
in a Commercial Claim/Consumer Transaction against	
(Name of defendant)	
,	
I certify that I have the requisite authority to bind	the corporation, partnership or association in a
settlement or trial of any claim or counterclaim.	
,	
Signature	 Date
Print Name	
Timerame	
	20
Sworn to before me this day of	, 20
Notary or Clerk of the Court	